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CONFIRMATION NO. 4444

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|--|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/643,635   | <b>FILING OR 371(c) DATE</b><br>08/18/2003<br><b>RULE</b>   | <b>CLASS</b><br>606           | <b>GROUP ART UNIT</b><br>3739   | <b>ATTORNEY DOCKET NO.</b><br>02-061 (US02) |
| <b>APPLICANTS</b><br>Robert S. Behl, Palo Alto, CA;<br>Morton Grosser, Menlo Park, CA;<br>Alexander L. Huang, Menlo Park, CA;  |   |                               |   |   |
| <b>** CONTINUING DATA *****</b> <i>RR</i><br>This application is a CON of 09/663,048 09/15/2000<br><b>** FOREIGN APPLICATIONS *****</b> <i>None, RR</i>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 04/30/2004</b>   |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>R. Kallens</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>16                   |
| <b>INDEPENDENT CLAIMS</b><br>2   |   |                               |   |   |
| <b>ADDRESS</b><br>23410  |   |                               |   |   |
| <b>TITLE</b><br>Methods and systems for focused bipolar tissue ablation  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>1150   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |